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### FEC FORM 2 STATEMENT OF CANDIDACY

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. (a) Name of Candidate (in full) Timothy E. Scott									
(b) Address (number and street)	□ Check	if addrage o	hanned		2 Candida	ato'e EEC	identification	Numbo	
1405 Ashley River Road	☐ Check if address changed			S4SC		identification	i ianiim <del>a</del>	•	
(c) City, State, and ZIP Code					3. Is Thi		New	(max)	Amende
Charleston		SC	2940	7-5305	Stater	nent	(N) OF	ì X	(A)
Party Affiliation	5. Office Sought			6. State & Dist	trict of Candi	date			
REPUBLICAN PARTY	Senate			SC	00				
DE	SIGNATION O	F PRIN	CIPAL	CAMPAIGI	N COMM	ITTEE			
I hereby designate the following na	med political committ	ee as my P	rincipal (	Campaign Comr	mittee for the	2016 (year of		ction(s).	
NOTE: This designation should be	filed with the appropr	iate office li	isted in t	he instructions.			·		
(a) Name of Committee (in full)				<del></del>					
Tim Scott for Senat	е								
(b) Address (number and street) 1405 Ashley River Road						·		<del></del>	
(c) City, State, and ZIP Code									
Charleston				sc	2940	7-5305			
<b>J.</b>	SIGNATION O			g Representativ		ILLS			
<ul> <li>I hereby authorize the following nar candidacy.</li> <li>NOTE: This designation should be</li> </ul>					mmittee, to re	eceive and	expend fun	ds on be	half of my
(a) Name of Committee (in full)									
Scott Roberts Gard	ner Ernst Vic	tory Fui	nd						
(b) Address (number and street) 901 N Washington Street									
Suite 700									
(c) City, State, and ZIP Code							<del></del>		
Alexandria				VA	22314	<b>⊢1535</b>			
I certify that I have exa	amined this Statemer	nt and to the	e best of	my knowledge a	and belief it i	s true, con	ect and con	nplete.	
ignature of Candidate	·				Date	• • • • • • • • • • • • • • • • • • • •			
Timothy E. Scott									
					07/14/20	015			
IOTE: Submission of false, erroneous	s, or incomplete infor	mation mav	subject	the person signi	na this State	ment to pe	enalties of 2	USCS	437a
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### FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

FEC Form 2 (Rev. 02/2003)		Page 2 /
DESIGNATION O	[ ADDITIONAL ]	
hereby authorize the following named committee, which is NC candidacy.	OT my principal campaign committee, to receive and expend funds o	n behalf of my
NOTE:This designation should be filed with the prince	ncipal campaign committee.	
(a) Name of Committee (in full)		
2013 Senators' Classic Commit	ttee	
(b) Address (number and street) 228 S Washington Street Suite 115		
(c) City, State and ZIP Code		
Alexandria	VA 22314-5404	
	OF OTHER AUTHORIZED COMMITTEES cluding Joint Fundraising Representatives)	[ ADDITIONAL ]
hereby sutherize the following named committee, which is N	NOT my principal campaign committee, to receive and expend funds	on behalf of my
candidacy,		
candidacy.	ncipal campaign committee.	
candidacy.  NOTE:This designation should be filed with the print (a) Name of Committee (in full)  Mississippi Majority Committee  (b) Address (number and street)  228 S Washington Street	ncipal campaign committee.	
candidacy.  NOTE:This designation should be filed with the print (a) Name of Committee (in full)  Mississippi Majority Committee  (b) Address (number and street) 228 S Washington Street Suite 115	ncipal campaign committee.	
candidacy.  NOTE:This designation should be filed with the print (a) Name of Committee (in full)  Mississippi Majority Committee  (b) Address (number and street)  228 S Washington Street	ncipal campaign committee.	
candidacy.  NOTE:This designation should be filed with the print (a) Name of Committee (in full)  Mississippi Majority Committee  (b) Address (number and street) 228 S Washington Street Suite 115  (c) City, State and ZIP Code Alexandria	ncipal campaign committee.	[ ADDITIONAL ]
candidacy.  NOTE:This designation should be filed with the print (a) Name of Committee (in full)  Mississippi Majority Committee  (b) Address (number and street) 228 S Washington Street Suite 115  (c) City, State and ZIP Code Alexandria  DESIGNATION (inc.)	VA 22314-5404  OF OTHER AUTHORIZED COMMITTEES	•
candidacy.  NOTE:This designation should be filed with the print (a) Name of Committee (in full)  Mississippi Majority Committee  (b) Address (number and street) 228 S Washington Street Suite 115  (c) City, State and ZIP Code Alexandria  DESIGNATION (inc.)	VA 22314-5404  OF OTHER AUTHORIZED COMMITTEES cluding Joint Fundraising Representatives)  NOT my principal campaign committee, to receive and expend funds	•
candidacy.  NOTE:This designation should be filed with the print (a) Name of Committee (in full)  Mississippi Majority Committee  (b) Address (number and street) 228 S Washington Street Suite 115  (c) City, State and ZIP Code Alexandria  DESIGNATION (inc.)  I hereby authorize the following named committee, which is No candidacy.	VA 22314-5404  OF OTHER AUTHORIZED COMMITTEES cluding Joint Fundraising Representatives)  NOT my principal campaign committee, to receive and expend funds	•
candidacy.  NOTE:This designation should be filed with the print (a) Name of Committee (in full)  Mississippi Majority Committee  (b) Address (number and street) 228 S Washington Street Suite 115  (c) City, State and ZIP Code Alexandria  DESIGNATION (inc.)  1 hereby authorize the following named committee, which is Noreinteed candidacy.  NOTE:This designation should be filed with the print (inc.)	VA 22314-5404  OF OTHER AUTHORIZED COMMITTEES cluding Joint Fundraising Representatives)  NOT my principal campaign committee, to receive and expend funds incipal campaign committee.	•
candidacy.  NOTE:This designation should be filed with the print (a) Name of Committee (in full)  Mississippi Majority Committee  (b) Address (number and street) 228 S Washington Street Suite 115  (c) City, State and ZIP Code Alexandria  DESIGNATION (inc.)  I hereby authorize the following named committee, which is Normalidacy.  NOTE:This designation should be filed with the print (a) Name of Committee (in full)	VA 22314-5404  OF OTHER AUTHORIZED COMMITTEES cluding Joint Fundraising Representatives)  NOT my principal campaign committee, to receive and expend funds incipal campaign committee.	•
candidacy.  NOTE:This designation should be filed with the print (a) Name of Committee (in full)  Mississippi Majority Committee  (b) Address (number and street) 228 S Washington Street Suite 115  (c) City, State and ZIP Code Alexandria  DESIGNATION (inc.)  I hereby authorize the following named committee, which is Norandidacy.  NOTE:This designation should be filed with the print (a) Name of Committee (in full) 2014 Senators' Classic Committee (b) Address (number and street) 228 S Washington Street	VA 22314-5404  OF OTHER AUTHORIZED COMMITTEES cluding Joint Fundraising Representatives)  NOT my principal campaign committee, to receive and expend funds incipal campaign committee.	•

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#### FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

FEC Form 2 (Rev. 02/2003)		Page 3 /
DESIGNA	[ADDITIONAL]	
hereby authorize the following named committee, w candidacy.	which is NOT my principal campaign committee, to receive and expend funds	on behalf of my
NOTE:This designation should be filed with	the principal campaign committee.	
(a) Name of Committee (in full)		
Scott Capito Rounds Victor	ory Fund	
(b) Address (number and street) 901 N Washington Street Suite 700		
(c) City, State and ZIP Code		
Alexandria	VA 22314-1535	
DESIGNA	ATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)	[ ADDITIONAL ]
	which is NOT my principal campaign committee, to receive and expend funds	on behalf of my
candidacy.		
	h the principal campaign committee.	
NOTE:This designation should be filed with	h the principal campaign committee.	
NOTE:This designation should be filed with  (a) Name of Committee (in full)		
NOTE:This designation should be filed with  (a) Name of Committee (in full)  Scott Cotton Daines Victor  (b) Address (number and street)  901 N Washington Street  Suite 700		
NOTE:This designation should be filed with  (a) Name of Committee (in full)  Scott Cotton Daines Victor  (b) Address (number and street)  901 N Washington Street		
NOTE:This designation should be filed with  (a) Name of Committee (in full)  Scott Cotton Daines Victor  (b) Address (number and street) 901 N Washington Street Suite 700  (c) City, State and ZIP Code Alexandria	ry Fund (SCDVF)	[ ADDITIONAL ]
NOTE:This designation should be filed with  (a) Name of Committee (in full)  Scott Cotton Daines Victor  (b) Address (number and street) 901 N Washington Street Suite 700  (c) City, State and ZIP Code Alexandria  DESIGNA	VA 22314-1535 ATION OF OTHER AUTHORIZED COMMITTEES	
NOTE:This designation should be filed with  (a) Name of Committee (in fuli)  Scott Cotton Daines Victor  (b) Address (number and street) 901 N Washington Street Suite 700  (c) City, State and ZIP Code Alexandria  DESIGNA	VA 22314-1535  ATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)  which is NOT my principal campaign committee, to receive and expend funds	
NOTE:This designation should be filed with  (a) Name of Committee (in fuli)  Scott Cotton Daines Victor  (b) Address (number and street) 901 N Washington Street Suite 700  (c) City, State and ZIP Code Alexandria  DESIGNA	VA 22314-1535  ATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)  which is NOT my principal campaign committee, to receive and expend funds	
NOTE:This designation should be filed with  (a) Name of Committee (in fuli)  Scott Cotton Daines Victor  (b) Address (number and street) 901 N Washington Street Suite 700  (c) City, State and ZIP Code Alexandria  DESIGNA  I hereby authorize the following named committee, vicandidacy.  NOTE:This designation should be filed with	VA 22314-1535  ATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives) which is NOT my principal campaign committee, to receive and expend funds the principal campaign committee.	
NOTE:This designation should be filed with  (a) Name of Committee (in full)  Scott Cotton Daines Victor  (b) Address (number and street) 901 N Washington Street Suite 700  (c) City, State and ZIP Code Alexandria  DESIGNA  I hereby authorize the following named committee, vicandidacy.  NOTE:This designation should be filed with  (a) Name of Committee (in full)	VA 22314-1535  ATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives) which is NOT my principal campaign committee, to receive and expend funds the principal campaign committee.	
NOTE:This designation should be filed with  (a) Name of Committee (in full)  Scott Cotton Daines Victor  (b) Address (number and street) 901 N Washington Street Suite 700  (c) City, State and ZIP Code Alexandria  DESIGNA  I hereby authorize the following named committee, vicandidacy.  NOTE:This designation should be filed with  (a) Name of Committee (in full)  Restore Our Majority 2013  (b) Address (number and street) 228 S Washington Street	VA 22314-1535  ATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives) which is NOT my principal campaign committee, to receive and expend funds the principal campaign committee.	

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#### FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

FEC Form 2 (Rev. 02/2003)		Page 4 /
	R AUTHORIZED COMMITTEES Fundraising Representatives)	[ ADDITIONAL ]
I hereby authorize the following named committee, which is NOT my princi candidacy.	pal campaign committee, to receive and expend funds of	on behalf of my
NOTE: This designation should be filed with the principal campa	aign committee.	
(a) Name of Committee (in full)  Barrasso Scott Victory Fund	-	
(b) Address (number and street) 901 N Washington Street Sulte 700		
(c) City, State and ZIP Code		
Alexandria	VA 22314-1535	
	ER AUTHORIZED COMMITTEES t Fundraising Representatives)	[ ADDITIONAL ]
I hereby authorize the following named committee, which is NOT my princicandidacy.	ipal campaign committee, to receive and expend funds	on behalf of my
NOTE: This designation should be filed with the principal camp	paign committee.	
(a) Name of Committee (in full)		<del> </del>
2015 ENATORS (LASSIC COMMITTEE		
(b) Address (number and street)		
ZZ8 S. WASHINGTON ST.		
(c) City, State and ZIP Code		
AEXMUDZIA, VA 22314		
	ER AUTHORIZED COMMITTEES t Fundraising Representatives)	[ ADDITIONAL ]
I hereby authorize the following named committee, which is NOT my princ candidacy.	cipal campaign committee, to receive and expend funds	on behalf of my
NOTE: This designation should be filed with the principal camp	paign committee.	
(a) Name of Committee (in full)		
(b) Address (number and street)		
(c) City, State and ZIP Code	<del></del>	



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